

Application No.: 10/675,135



Docket No.: 30810/39676A

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 16, 2005

Signature:

Roger A. Heppermann
(Roger A. Heppermann)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Michael J. Brookman

Application No.: 10/675,135

Confirmation No.: 5725

Filed: September 29, 2003

Art Unit: 3743

For: Powered Air Purifying Respirator System and
Breathing Apparatus

Examiner: Aaron J. Lewis

AMENDMENT A

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

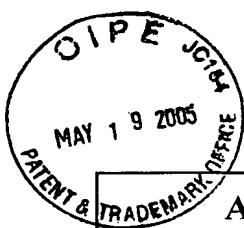
In response to the Office Action dated December 16, 2004 please enter the following amendments and consider the following remarks with respect to the above-identified U.S. patent application.

Amendments to the specification begin on page 2 of this paper.

Amendments to the claims can be found in a listing of the claims which begins on page 3 of this paper.

Amendments to the drawings begin on page 8 of this paper.

Remarks/Arguments begin on page 9 of this paper.

**AMENDMENT TRANSMITTAL LETTER**Docket No.
30810/39676AApplication No.
10/675,135-Conf. #5725Filing Date
September 29, 2003Examiner
Aaron J. LewisArt Unit
3743

Applicant(s): Michael J. Brookman

Invention: Powered Air Purifying Respirator System and Breathing Apparatus

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	15	- 20 =	0	x	
Independent Claims	2	- 3 =	0	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within second month IDS					225.00 180.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					405.00

- ☐ Large Entity ☒ Small Entity
- ☐ No additional fee is required for this amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of \$ 405.00 to cover the filing fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 13-2855
as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Roger A. Heppermann
Attorney Reg. No.: 37,641

Dated: May 16, 2005

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Attorney Docket No.: 30810/39676A

Certificate of Mailing Under 37 CFR 1.8

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PTO/SB/08